Combined Declaration For Patent Application and Power of Attorney						ATTORNEY DOCKET 81746JJH					
As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
MATERIAL AND METHOD FOR THE TREATMENT OF PHOTOGRAPHIC EFFLUENTS											
The specification of which (check only one item below):											
is attached hereto.											
was filed as United States Application Serial No. on and was amended on (if applicable).											
was filed as PCT international application Number on and was amended on (if applicable).											
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.											
I acknowledge the duty to disclose 37, Code of Federal Regulations,		ent & Trademark (Office :	all information known to n	ne to be mat	terial tops	tentability a	s defined	l in Title		
I hereby claim foreign priority be		35, United States	Code	§119 (a)-*d) or 365 (b) o	f any foreig	n applic	ation(s) for 1	patent or	inventor's		
certificate, or (365 (a) of any PC					-				1		
and have also identified below a		• • •		•		-	•	_	- 1		
one country other than the United	States of Americ	a filed by me on th	he sam	e subject matter having a f	filing date b	efore tha	t of the appl	ication(s) of which		
priority is claimed: PRIOR FOREIGN/PCT APPL	CATION(S) AN	D ANY PRIORITY	YCLA	IMS UNDER 35 U.S.C.	119:						
		PLICATION NUMBER		DATE OF FILING			PRIORITY CLAIMED L				
(PCT, indicate PCT) France		0107566	 -	(month/day/year)	<u>. </u>		YES	NOER SOSC	NO		
riance	•	0107300		11 June 200		X	YES		No		
							YE5		NO		
I hereby claim the benefit under	Title 35, United S	tates Code, 119 §(e) of a	ny United States provision	al applicatio	n(s) liste	d below:				
PRIOR PROVISIONAL APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119 (e):											
PROVISIONAL	PLICATION NUMBER				FILING DATE (mo	ntricay/year)					
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material topatentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:											
PRIOR US APPLICATIONS O 35USC§120:	R PCT INTERN	ATIONAL APPL	ICATI	ONS DESIGNATING TH	E U.S FO	R BENE	FIT UNDER	₹			
	U.S. APPLI	CATIONS				ST	ATUS (Check o	one)			
U.S. APPLICATION NUMBER		·	U.S. FILING DATE		PATENT	ED	PENDING	ABA	NDONED		
PCT APPLICATIONS DESIGNATING THE U.S.											
PCT APPLICATION NO. PCT FILI		NG DATE U.S. SERIAL NUMBERS ASSIGNED (if any)									
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Combined	ATTORNEY DOCKET				
agent(s) associated with Eastman K	amed inventor, I hereby appoint odak Company Customer No.	the attorney(s) and/or 01333 to prosecute		
this app therewi		siness in the Patent and Tradema	rk Office connected		
Send Con	espondence to: Patent Leg	Direct Telephone Calls to:			
	Eastman K	J. Jeffrey Hawley			
343 State Street Rochester, NY 14650-2201			(716) 724-4947 FAX: (716) 724-9657		
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BUSINESS ADDRESS		СІТҮ	STATE & ZIP CODE (COUNTRY)		
FULL NAME INVENTOR	F FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
RESIDENCE CIT IZENSH		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
FULL NAME I		FIRST GIVEN NAME	SECOND GIVEN NAME		
RESIDENCE CITIZENSH		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
ue; and tw	ther that these statements were made wit	own knowledge are true and that all statements man the knowledge that willful false statements and such willful false statements may jeopardize the	the like so made are nunishable by fine		

Denelli Welling	Olvier taralet	SIGNATURE OF INVENTOR 203
May 16, 2002	May 16, 2002	DATE
SIGNATURE OF INVENTOR 204 DATE	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE